# PB# 04-12

# YWCA (Temp. Trailer) (Withdrawn)

4-2-3.222

TOWN OF NEW WINDSOR
PLANNING BOARD
APPROVED COPY
DATE: Withdrawn 1/20/07

## eliminating **Acism** empowering women **ywca**

YWCA Orange County 565 Union Avenue New Windsor, NY 12553 www.ywca-orangecty.org

Phone: 845-561-8050 Fax: 845-561-1860

Glynis Cowart, President Christine Sadowski, Exec. Director

Town of New Windsor Planning Board 555 Union Avenue New Windsor, NY 12553 ATTN: Myra Mason

Dear Ms. Mason;

Due to financial restraints, the YWCA of Orange County will not be erecting temporary trailers on the property at 565 Union Avenue, New Windsor, NY 12553. Therefore, I am withdrawing the application, and ask that you remove any violations on the property.

Please call if you need anything further.

Thank you for your attention to this matter.

Christine Sadowski

# AGENT/OWNER PROXY STATEMENT (for professional representation)

## for submittal to the: TOWN OF NEW WINDSOR PLANNING BOARD

CHRISTINE SADOWSKI, EXECUTIVE	DIR., deposes and says that he resides
,	NALL in the County of ORANGE
and State of NEW YORK	and that he is the owner of property tax map
(Sec. Block Lot designation number(Sec. Block Z Lot the foregoing application and that he designates:	t 3. 222) which is the premises described in
(Agent Name & Addre	ess)
(Name & Address of Professional Represent as his agent to make the attached application.  THIS DESIGNATION SHALL BE EFFECTIVE OF UNTIL TWO (2) YEARS FROM THE DATE AGE	UNTIL WITHDRAWN BY THE OWNER OR
SWORN BEFORE ME THIS:  2007)	** (Must be Notarized
R D O H	Agent's Signature (If Applicable)
NOTABARY RISIDIFULC Notary Public, State of New York Outliffed in Orange County Registration No. 015M4809372  *** *** Pr Gengraission Expirer June 30 (20.0) ** *** *** Pr Gengraission Expirer June 30 (20.0) ** *** *** *** *** *** *** *** *** ***	Professional Representative's Signature

THIS PROXY SHALL BE VOID TWO (2) YEARS AFTER AGREED TO BY THE OWNER

14-16-4 (2/87)—Text 12	
PROJECT I.D. NUMBER	

#### 617.21

#### Appendix C

#### SEQF

#### State Environmental Quality Review

### SHORT ENVIRONMENTAL ASSESSMENT FORM For UNLISTED ACTIONS Only

PART I—PROJECT INFORMATION (To be completed by App	olicant or Project sponsor)	
1. APPLICANT /SPONSOR	2. PROJECT NAME	
YW CA	Summer camp trailer	
3. PROJECT LOCATION:  Municipality  New Windoor	county Org Mak	
4. PRECISE LOCATION (Street address and road intersections, prominent	landmarks, etc., or provide map)	
565 Union Are		
	·	
5. IS PROPOSED ACTION:  New Expansion Modification/alteration		
6. DESCRIBE PROJECT BRIEFLY:		
trailer for summer camp	• •	
/		
7. AMOUNT OF LAND AFFECTED:  Initially acres Ultimately	acres	
8. WILL PROPOSED ACTION COMPLY WITH EXISTING ZONING OR OTHE		
Yes No If No, describe briefly	. The same of the	
9. WHATUS PRESENT LAND USE IN VICINITY OF PROJECT?  Residential Industrial Commercial Aging Describe:	iculture Park/Forest/Open space Other	
10. DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUNDING, NOW OR ULTIMATELY FROM ANY OTHER GOVERNMENTAL AGENCY (FEDERAL, STATE OR LOCAL)?		
Yes No If yes, list agency(s) and permit/approvals		
11. DOES ANY ASPECT OF THE ACTION HAVE A CURRENTLY VALID PI	ERMIT OR APPROVAL?	
Yes No If yes, list agency name and permit/approval		
12. AS A RESULT OF PROPOSED ACTION WILL EXISTING PERMIT/APPROVAL REQUIRE MODIFICATION?  Yes No		
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE		
Applicant/sponsor frame: Stuer Dwell	Date: 5-17-04	
Signature:		

If the action is in the Coastal Area, and you are a state agency, complete the Coastal Assessment Form before proceeding with this assessment

TART II-ENVIRONMENTAL ASSESSMENT (To be completed by A	gency)
A. DOES ACTION EXCEED ANY TYPE I THRESHOLD IN 6 NYCRR, PART 617.12?	If yes, coordinate the review process and use the FULL EAF.
B. WILL ACTION RECEIVE COORDINATED REVIEW AS PROVIDED FOR UNLISTED A may be superseded by another involved agency.  Yes No	ACTIONS IN 6 NYCRR, PART 617.6? If No, a negative declaration
C. COULD ACTION RESULT IN ANY ADVERSE EFFECTS ASSOCIATED WITH THE I C1. Existing air quality, surface or groundwater quality or quantity, noise le potential for erosion, drainage or flooding problems? Explain briefly:	
C2. Aesthetic, agricultural, archaeological, historic, or other natural or cultural	resources; or community or neighborhood character? Explain briefly
C3. Vegetation or fauna, fish, shellfish or wildlife species, significant habitats,	or threatened or endangered species? Explain briefly:
C4. A community's existing plans or goals as officially adopted, or a change in us	se or intensity of use of land or other natural resources? Explain briefly
C5. Growth, subsequent development, or related activities likely to be induced	by the proposed action? Explain briefly.
C6. Long term, short term, cumulative, or other effects not identified in C1-C5?	Explain briefly.
.  C7. Other impacts (including changes in use of either quantity or type of energy	y)? Explain briefly.
•	
D. IS THERE, OR IS THERE LIKELY TO BE, CONTROVERSY RELATED TO POTENTIAL Yes No If Yes, explain briefly	AL ADVERSE ENVIRONMENTAL IMPACTS?
ART III—DETERMINATION OF SIGNIFICANCE (To be completed b	
INSTRUCTIONS: For each adverse effect identified above, determine who Each effect should be assessed in connection with its (a) setting (i.e. irreversibility; (e) geographic scope; and (f) magnitude. If necessary, add explanations contain sufficient detail to show that all relevant adverse	urban or rural); (b) probability of occurring; (c) duration; (d attachments or reference supporting materials. Ensure tha
Check this box if you have identified one or more potential occur. Then proceed directly to the FULL EAF and/or prepare	lly large or significant adverse impacts which MAY are a positive declaration.
Check this box if you have determined, based on the interpolation documentation, that the proposed action WILL NOT result AND provide on attachments as necessary, the reasons supposed in the control of the control	in any significant adverse environmental impacts
Name of Lead Agenc	у
Print or Type Name of Responsible Officer in Lead Agency	Title of Responsible Officer
Signature of Responsible Officer in Lead Agency	Signature of Preparer (If different from responsible officer)
Date	

